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01/11/24 • COVID › NEWS

Did HCQ Really Cause 17,000 Deaths? Experts Weigh in on Flawed But Highly Touted Study

A new French retrospective study claimed hydroxychloroquine caused nearly 17,000 deaths when used on hospitalized COVID-19 patients. But experts contended the analysis relied on flawed data, ignored evidence showing efficacy with early outpatient treatment, and amounted to a political attack on HCQ pioneer Dr. Didier Raoult.

By John-Michael Dumais

30

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Nearly 17,000 people in the U.S. and five other countries "may have died" early in the pandemic because they used hydroxychloroquine (HCQ) to treat COVID-19, according to a paper published in the February 2024 issue of Biomedicine & Pharmacotherapy.

Major media outlets, including Politico, The Hill and Forbes ran with the headline.

However, physicians and scientists interviewed by The Defender said the study's authors based their conclusions on flawed data and ignored the large body of evidence showing the efficacy of HCQ for early, outpatient treatment of the virus.

The French study is a retrospective meta-analysis of 44 papers with data on hospitalized patients in the U.S., France, Belgium, Italy, Spain and Turkey from March through July 2020.

The researchers stated that mortality rates varied significantly from across hospitals and regions, and acknowledged they could not account for how these rates were influenced by "age, sex, comorbidities, ICU capacity, improvement in COVID-19 management" and other factors.

For 90% of the total hospitalizations reviewed, the researchers had to guess at the rate of patients exposed to HCQ, offering ranges from a low of 16.3% to a high of 99.1%. In the U.S., which accounted for 73% of the study's data set, that number ranged from 16.3% to 75.9%, or between 144,750 and 674,020 patients.

They also had to guess how much HCQ or its analog chloroquine (CQ) was administered. Furthermore, they readily admitted, "The effect of HCQ on mortality was the main source of uncertainty for the proposed estimates" and that those estimates could be overstated by a factor of 5 (i.e., only 3,000 may have died) or understated by a factor of 2 (i.e., 30,000 may have died).

The study also said nothing about the impact of other drugs patients may have received, such as remdesivir, or whether patients were put on ventilators prior to dying. These two factors alone — widely practiced in U.S. hospitals during the pandemic — are known to have significantly increased COVID-19 mortality.

Dr. Peter McCullough told The Defender the 44 studies used in the meta-analysis were "heterogeneous" and that "Nonrandomized, retrospective cross-sectional cohorts created from administrative data demonstrated confounding by indication."

In other words, this type of look-back study could not reliably tell if HCQ had an effect or not as it is unable to control for the various ways the treatment and non-treatment groups differed from the start, nor could it account for the different methods or results used in the studies.

"That means hospitalists desperate to help patients administered HCQ too late in the course and patients were too far gone," McCullough said. "In this circumstance, it wasn't the HCQ that caused death — it was COVID-19 illness."

"The Wuhan Cover-Up"
by Robert F. Kennedy Jr.

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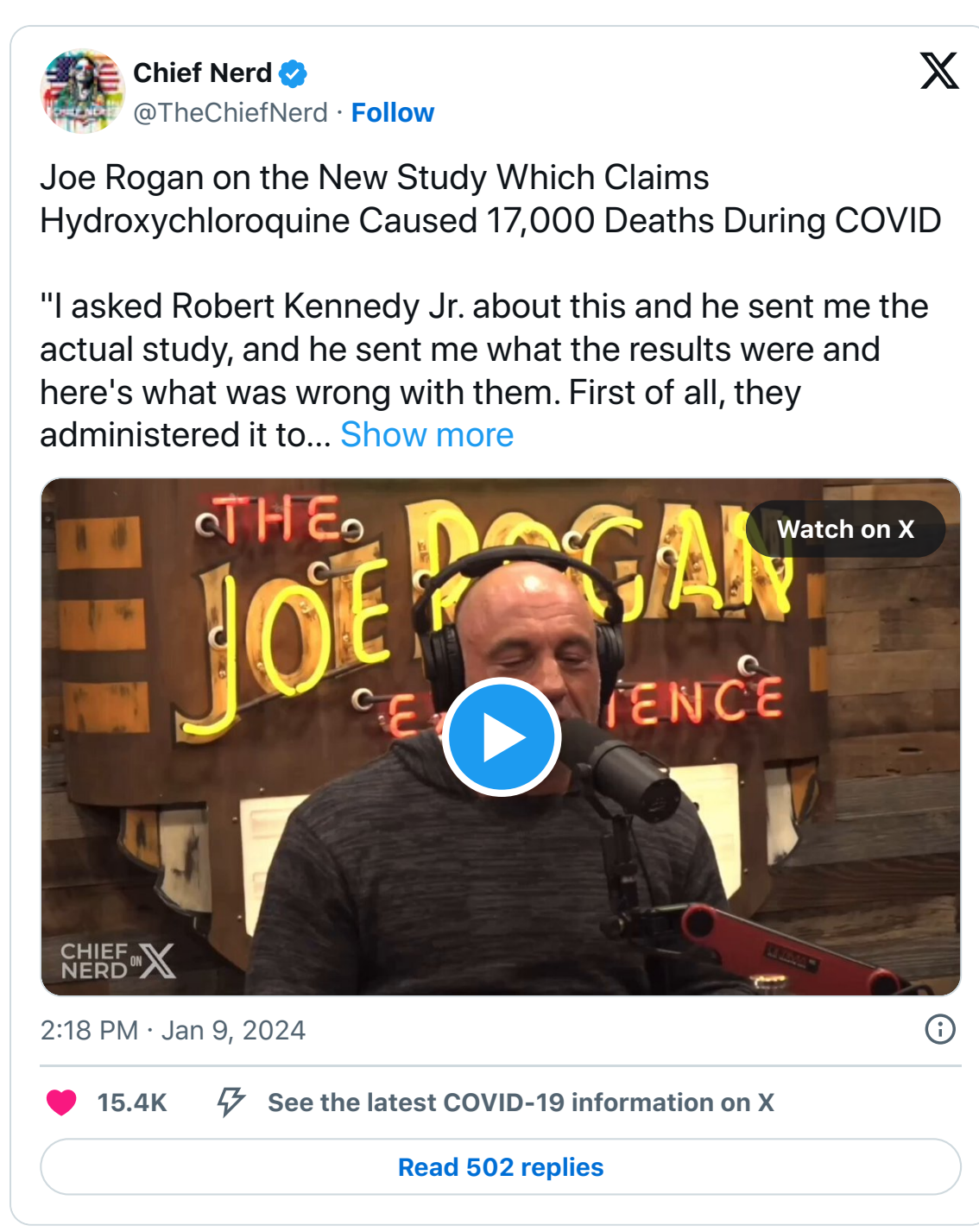
Harvey Risch, M.D., Ph.D., professor emeritus of epidemiology at Yale, told The Defender that such studies must address not just the risks associated with a medication, but the additional risks associated with patients' pre-existing conditions. He said:

> "In the case of hospital use of HCQ, studies must adjust for the various chronic conditions that predispose to HCQ use, such as obesity, diabetes, chronic cardiac diseases, chronic kidney diseases, cancer history, immunocompromise, etc.
>
> "I don't see that the cohort studies used as data for analysis in this paper have been able to do that, so conclusions about HCQ associations as actually causal are inappropriate and unsupported.
>
> "Virtually every nonrandomized study that I have seen over the last four years shows that patients taking HCQ tend to have worse health and worse chronic conditions. That makes this paper's assumption that HCQ use is causally associated with increased mortality risk fiction, which makes the study's conclusions fiction."

Risch also said, "Hospitalized COVID-19 is a totally different disease than outpatient COVID-19." He said the French study "is irrelevant for that," and that his work showing the effectiveness of HCQ is with outpatient use "to prevent hospitalization and mortality."

Joe Rogan on his Tuesday episode of "The Joe Rogan Experience" shared what Robert F. Kennedy Jr., Children's Health Defense chairman on leave, told him about the study:



Chief Nerd
@TheChiefNerd · Follow

Joe Rogan on the New Study Which Claims Hydroxychloroquine Caused 17,000 Deaths During COVID

"I asked Robert Kennedy Jr. about this and he sent me the actual study, and he sent me what the results were and here's what was wrong with them. First of all, they administered it to... Show more

2:18 PM · Jan 9, 2024

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Studies cited for odds ratio used 'potentially fatal' HCQ dosages

The researchers derived the 1.11 (11%) odds ratio they used to estimate HCQ-linked mortality from a 2021 meta-analysis of randomized trials.

That meta-analysis drew 63% of its data from the World Health Organization (WHO) Solidarity trial and the Wellcome Trust and Bill & Melinda Gates Foundation-sponsored U.K. Recovery trial, both of which were deeply flawed.

Dr. Meryl Nass reported on the "potentially fatal" dosages of HCQ and CQ used in the Solidarity trial — 2.4 grams during the first 24 hours, and a cumulative dose of 9.2 grams over 10 days. Nass also called out the trial design, which led to HCQ being given too late in the progression of the disease to be of benefit.

After Nass contacted the WHO to report her observations, the trial was paused and several countries withdrew from the trial before it restarted.

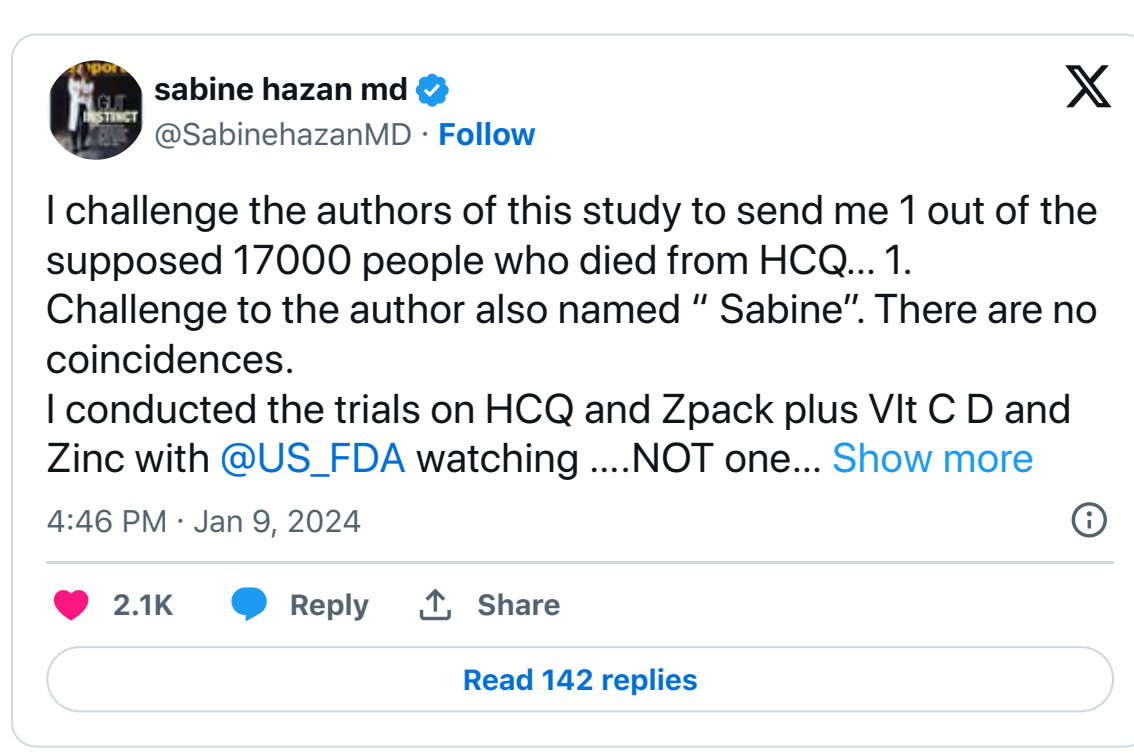
Normally, chronic daily use of HCQ for people experiencing systemic lupus or rheumatoid arthritis is between 200 and 400 milligrams (mg) daily or a maximum of 5 mg/kilogram (kg). Malaria treatments call for 2,000 mg (2 grams) divided over three days for patients over 60 kg. A prophylactic dose for malaria is typically 400 mg once a week for eight weeks.

The U.K. Recovery trial had similar issues related to dosages — more than 4 times the amount typically recommended for any similar medical condition. Nass reported that Twitter users who noticed the dosing problem in the study protocol began reporting on it with the hashtag #RecoveryGate.

During the Recovery trial, 396 of 1,542 people who received HCQ while hospitalized died — about 10% higher than standard care. Researchers reported "no clinical benefit" from the use of HCQ.

"The doses used in these trials are not recommended for therapy of any medical condition," wrote Nass. "These trials are not, in fact, testing the benefits of HCQ on Covid-19, but rather are testing whether patients survive toxic, non-therapeutic doses."

HCQ, in use since 1955, is included on WHO's list of "essential medicines."



sabine hazan md
@SabinehazanMD · Follow

I challenge the authors of this study to send me 1 out of the supposed 17000 people who died from HCQ... 1.
Challenge to the author also named " Sabine". There are no coincidences.
I conducted the trials on HCQ and Zpack plus VIt C D and Zinc with @US_FDA watching ....NOT one... Show more

4:46 PM · Jan 9, 2024

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HCQ and COVID

Many doctors began using HCQ early in the pandemic, often in combination with zinc and an antibiotic such as azithromycin (AZM).

"Consented, prospective cohort studies that administered HCQ with AZM early in the hospitalization demonstrated reductions in mortality early in the pandemic," McCullough said, citing Arshad et al., 2020.

In April 2020, a survey of U.S. doctors found that two-thirds would prescribe CQ or HCQ to "treat or prevent COVID-19 in a family member."

Among the HCQ pioneers was French physician Didier Raoult, who ran numerous studies showing the effectiveness of the anti-malarial drug against COVID-19.

By early spring 2020, Raoult had treated more than 1,000 patients with an HCQ and AZM protocol, finding a 91% direct success rate and a .47% death rate (for five people ranging from 74-95 years old), with 0% cardiac toxicity, when treatment was started immediately after diagnosis.

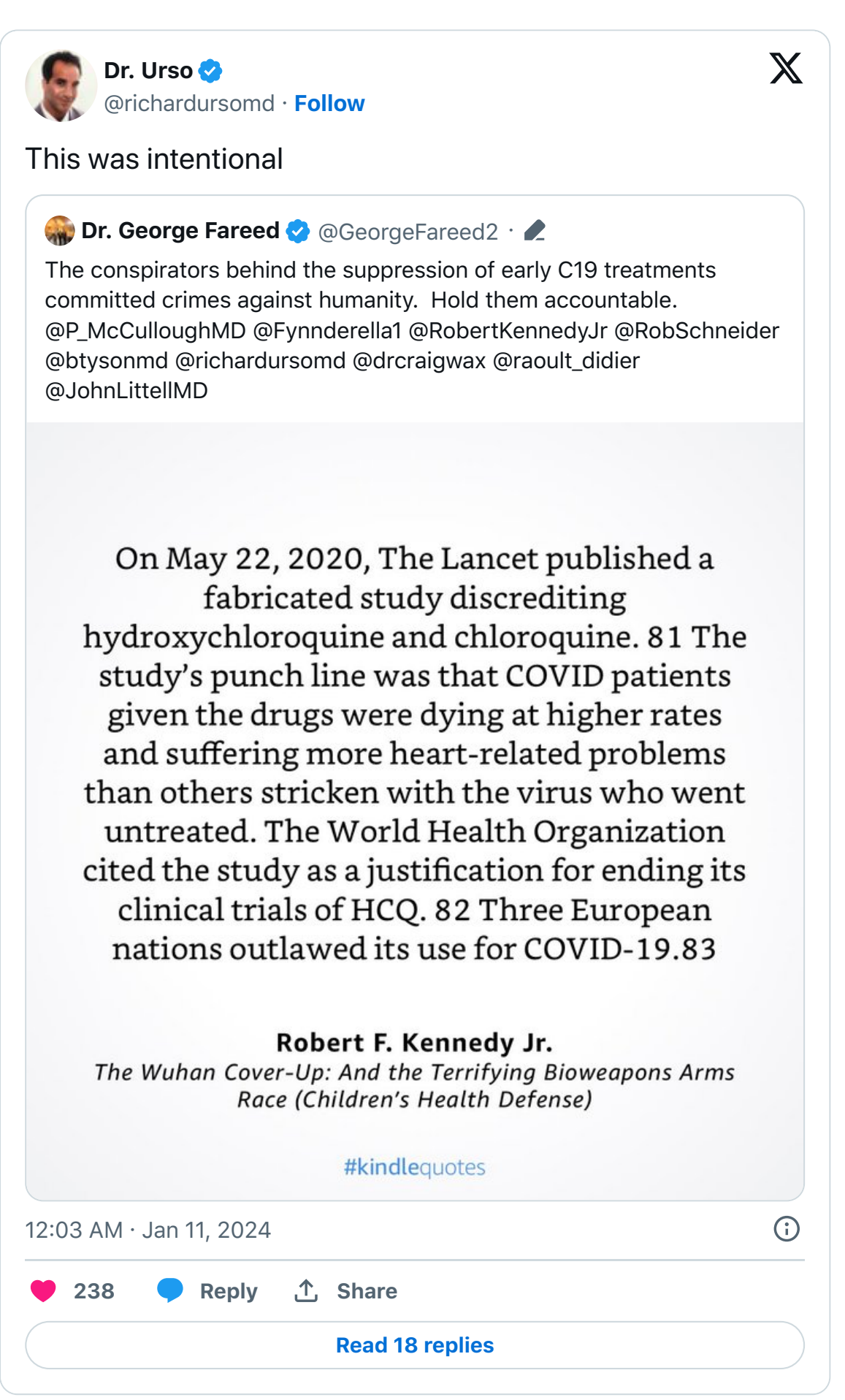
A group of French doctors subsequently filed a petition urging the prime minister and minister of health to make HCQ available in all French hospitals.

Dr. Vladimir "Zev" Zelenko (since deceased) used a similar protocol in the U.S., adding zinc, initially treating over 900 cases with a 99.9% success rate.

McCullough told The Defender there are 417 studies with HCQ that "demonstrate a signal of benefit particularly when administered early in the ambulatory phase of illness within an established safety protocol well understood by senior physicians familiar with COVID-19 management."

A study published October 2023 in New Microbes and New Infections is one of the latest to show the efficacy and safety of in-hospital treatment of COVID-19 infection with low-dose hydroxychloroquine and azithromycin. The researchers concluded, "Patients who did not receive HCQ had a 57% higher risk of mortality. A survival benefit in the treatment group was consistent across all age groups."

HCQ has been a mainstay in the McCullough Protocol for early ambulatory treatment of COVID-19 since its original publication in The American Journal of Medicine in August 2020.



Dr. Urso
@richardursomd · Follow

This was intentional

Dr. George Fareed @GeorgeFareed2
The conspirators behind the suppression of early C19 treatments committed crimes against humanity. Hold them accountable.
@P_McCulloughMD @Fynnderella1 @RobertKennedyJr @RobSchneider @btysonmd @richardursomd @drcraigwax @raoult_didier @JohnLittellMD

On May 22, 2020, The Lancet published a fabricated study discrediting hydroxychloroquine and chloroquine. 81 The study's punch line was that COVID patients given the drugs were dying at higher rates and suffering more heart-related problems than others stricken with the virus who went untreated. The World Health Organization cited the study as a justification for ending its clinical trials of HCQ. 82 Three European nations outlawed its use for COVID-19.83

Robert F. Kennedy Jr.
The Wuhan Cover-Up: And the Terrifying Bioweapons Arms Race (Children's Health Defense)

#kindlequotes

12:03 AM · Jan 11, 2024

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Despite his early success and some support from colleagues, Raoult, now retired, has ultimately become a lightning rod for the kind of character assassination and censorship that was rampant during the pandemic, with French medical bodies last May calling on authorities to punish him for "unauthorized" trials of HCQ to treat COVID-19.

Given that six of the seven authors of the study are from France, McCullough told The Defender he was "suspicious this is a political attack" against Raoult, whom he called a "pioneer and leader in the development of HCQ as a proven therapeutic in the early ambulatory treatment of SARS-Cov-2 infection."

The study authors admit this plainly enough in the discussion section:

> "It is critical that representatives of public authorities should not, on the basis of their personal conviction, promote the prescription of medicines that have not been formally evaluated, thereby falsely raising hopes as to the existence of a solution to a complex health crisis."

Politico, offering further support to McCullough's argument, stated, "Hydroxychloroquine gained prominence partly due to French virologist Didier Raoult who had headed the Méditerranée Infection Foundation hospital, but was later removed amid growing controversy."

The ultimate goal of the paper may have been to restrict the use of off-label medications. The authors stated their conclusion "argues in favour of tightly regulating access to off-label prescriptions during future pandemics."

RFK Jr. and Brian Hooker's
New Book: "Vax-Unvax"

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HCQ long known as effective against coronaviruses

In a post published Monday, Nass said Dr. Anthony Fauci not only refused to pay for trials to study HCQ, but canceled two National Institute of Allergy and Infectious Disease (NIAID)-sponsored trials of HCQ in outpatient settings before they could be completed.

The trials were reportedly canceled due to lack of adequate enrollments. After reviewing the consent document for the trial, Nass concluded that enrollments were "discouraged … by making the drug appear to be very dangerous."

Nass pointed to "proof he [Fauci] knew the drug would work," highlighting 2014 study published by NIAID reviewing the "repurposing of existing drugs" in treating Middle East respiratory syndrome coronavirus (MERS-CoV) and severe acute respiratory syndrome coronavirus (SARS-CoV).

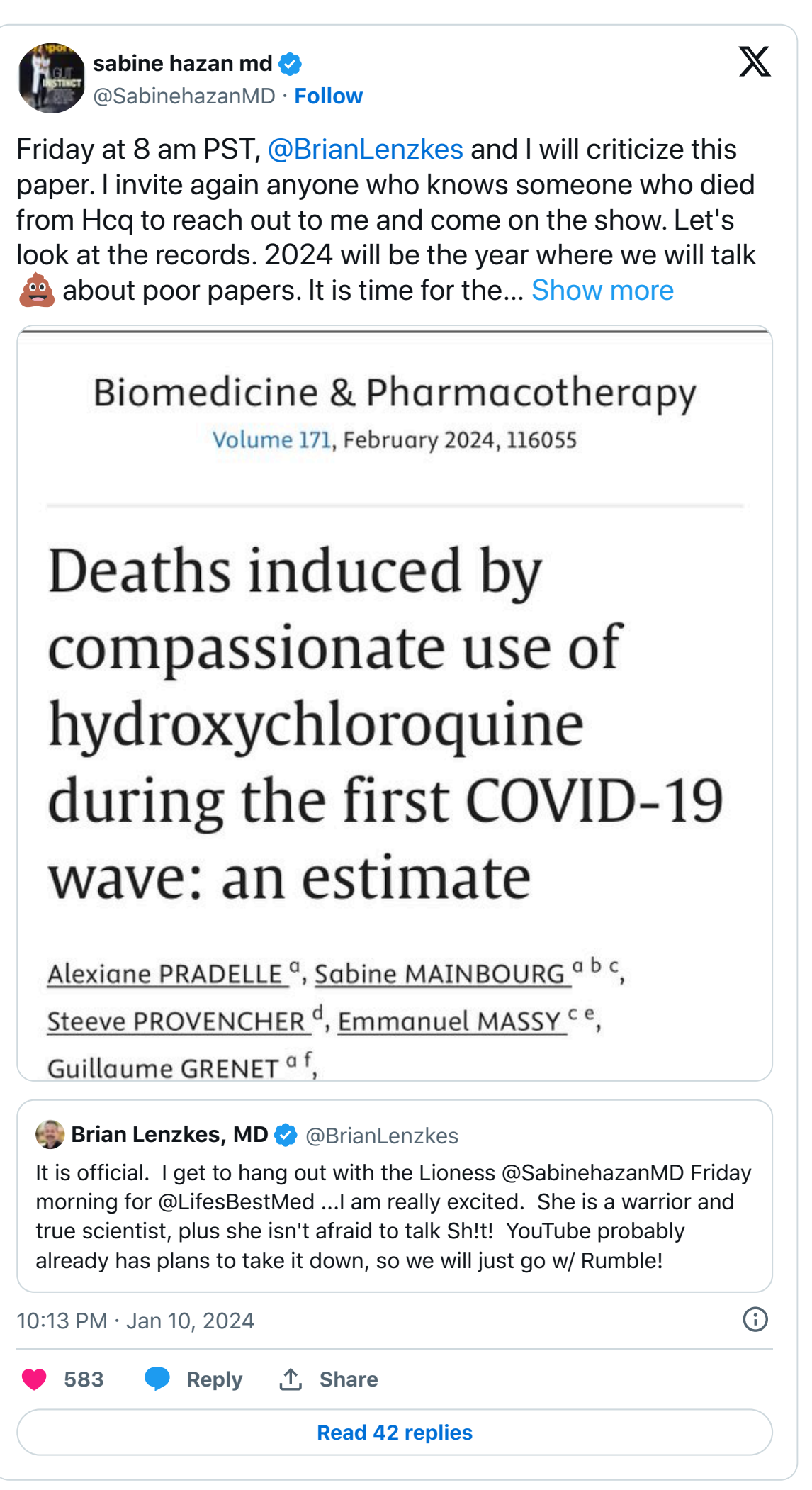
Both HCQ and CQ were found to kill both SARS-1 and MERS viruses in tissue culture.

Nass in 2022 pointed out a 2005 Centers for Disease Control and Prevention study showing CQ to be a potent inhibitor of SARS coronavirus infection and spread.

The paper concluded, "Chloroquine has strong antiviral effects on SARS-COV infection … suggesting both prophylactic and therapeutic advantage."

"Our governments already knew of options for treating COVID before it appeared," Nass wrote, "but … did everything they could to stop people from obtaining the chloroquine drugs."

Dr. Sabine Hazan will host a discussion of the French study on Jan. 12 at 8 p.m. PST.



sabine hazan md
@SabinehazanMD · Follow

Friday at 8 am PST, @BrianLenzkes and I will criticize this paper. I invite again anyone who knows someone who died from Hcq to reach out to me and come on the show. Let's look at the records. 2024 will be the year where we will talk 💩 about poor papers. It is time for the... Show more

Biomedicine & Pharmacotherapy
Volume 171, February 2024, 116055

Deaths induced by compassionate use of hydroxychloroquine during the first COVID-19 wave: an estimate

Alexiane PRADELLE [a], Sabine MAINBOURG [a b c], Steeve PROVENCHER [d], Emmanuel MASSY [c e], Guillaume GRENET [a f]

Brian Lenzkes, MD @BrianLenzkes
It is official. I get to hang out with the Lioness @SabinehazanMD Friday morning for @LifesBestMed ...I am really excited. She is a warrior and true scientist, plus she isn't afraid to talk Sh!t! YouTube probably already has plans to take it down, so we will just go w/ Rumble!

10:13 PM · Jan 10, 2024

583 Reply Share

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The Defender on occasion posts content related to Children's Health Defense's nonprofit mission that features Mr. Kennedy's views on the issues CHD and The Defender regularly cover. In keeping with Federal Election Commission rules, this content does not represent an endorsement of Mr. Kennedy, who is on leave from CHD and is running as an independent for president of the U.S.

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John-Michael Dumais

John-Michael Dumais is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, war, health freedom and all things related to the COVID-19 pandemic.

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Got it

30 Comments

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Best Newest Oldest

holisticpoet
21 hours ago

If we did a study on how many people are killed by pharmaceutical drugs each year in the US alone we would find out that approximately 128 thousand people die from taking the correct drug using the correct dosage. Then if we did a study to find out how many people died from medical errors that would about double. These studies have already been done. Dr.Barbara Starfield in the early 2000's did a study an found that 106 thousand people died from taking the correct drug in the correct dosage for whatever ailment. It has gone up since then. The real question is what would the real figures be now after the Covid jab>? If studies were done on this like the hydroxychloroquine study were done, it would most likely be 5 to 10 million deaths in the US alone just from the Covid jab.

Doesn't it make sense that the borders are open so that when they take the next census there is not a large drop in the population?

16 0 Reply • Share ›

BChristine → holisticpoet
19 hours ago

Interesting post ... especially the last sentence.

3 0 Reply • Share ›

One Day Closer
21 hours ago edited

I would take my chances with HCQ and IVM and even healing crystals before I would ever take Paxlovid or remdisivir or any of the things on the governments protocol list.

16 0 Reply • Share ›

BarbaraCharis → One Day Closer
21 hours ago

AGREED! I feel exactly the same. People who have not done any research have no idea how many deaths their doctors are responsible for by handing out most prescriptions. There is no drug without a side effect!!! The only thing that should go into one's mouth...the right nutritious food. If people simply knew how to eat right..we would have no need for medical care. The processed Food Industry is also responsible for this situation. Processed food removes the nutrients that people need for good mental and physical health. HCQ and IVM do work...so doctors are not happy, because they help to cure. This is not something the AMA is about. Cures do not contribute to its coffers.

8 0 Reply • Share ›

BarbaraCharis → BarbaraCharis
21 hours ago

A healthy immune system is a real defense. It is strengthened by eating food that is natural and unprocessed. Doctors don't study nutrition in med school. They get their drug and vaccine information from pharmaceutical reps.

10 0 Reply • Share ›

Someone → BarbaraCharis
18 hours ago edited

Medical care would still be needed, but for the things mainstream medicine is actually good for: injuries. A good immune system doesn't do much if someone gets shot and one absolutely should go to a hospital to get the bullet removed. That is one of the few things that our current medical system does well. The good immune system will assist with recovery and infection prevention.

What bothers me the most about the mainstream is that even giving out those prescriptions is guesswork. I remember when I was in 6th grade I got some weird skin rash in my torso area. It didn't itch, but for a kid who had to change for gym, it was embarrassing. Took most of the school year and numerous visits to both the PCP and a dermatologist before they finally figured out what it was and got it cleared up. Neither bothered to do any tests to determine what sort of rash it was, they just kept handing me different antibiotics and skin creams that did the job on a temporary basis, but then it would come back once I was off them. Then after many tries one finally worked and cleared it up for good.

Honestly reminds me of my job in tech support where I take what the customer describes and guess at what is the most likely cause and try some troubleshooting. If that doesn't work then I try another thing and keep repeating until the issue is resolved. Because let's be real, doctors don't know as much about how bodies work as they think they do, they just know to use X pill with Y disease and that Y disease has symptoms A, B and C.

4 0 Reply • Share ›

GarySummers
a day ago edited

1.) "Fauci Would Prescribe Chloroquine to Patient Suffering From COVID-19"

In the past 24 hours, Dr. Anthony Fauci has said there is no foundational difference between himself and President Trump in how to deal with the government's response to COVID-19, that the president has never over-ruled his recommendations, that he wished the media would stop trying to pit him against the president and, now, "we learn that he would prescribe "hydroxychloroquine" to a patient if he were treating them for coronavirus."
https://townhall.com/column...

2.) "DARPA Covid Whistleblower's Blockbuster Claim"
Project Veritas says buried documents show Fauci signed off on forbidden gain-of-function research!

The documents also appear to confirm that "ivermectin and hydroxychloroquine" are effective treatments for Covid infection. If this is true, and these documents are authentic, it raises the obvious question: why did the US Government work to suppress this knowledge and these treatments?

Dr. Fauci will be questioned today at a Congressional hearing. It will be interesting to hear what he has to say about all this. If these documents are fake, then Maj. Joseph Murphy will have destroyed his military career for the sake of a hoax. How likely is that? If their allegations prove true, though, then the senior US public health scientist signed off on the project that, mismanaged by the Wuhan lab, infected the world with a virus bioengineered by the Americans and the Chinese -- and then lied about it.
https://www.theamericancons...

5 0 Reply • Share ›

Drummer → GarySummers
21 hours ago

"...infected the world with a virus bioengineered by the Americans and the Chinese..."
Which is exactly what Dr. David E. Martin stated after examining the 4000+ SARS coronavirus research grant fundings and SARS coronavirus patent applications and approvals.

2 0 Reply • Share ›

Paul Hastilow
12 hours ago

How Many Years will it take for the so Called "Health Service Administration "to own up to their Serious Mistakes concerning early treatment for COVID ?
3 years later, they are still Protecting their "Bonus Payments" Sponsors, by trying to distract attention away from their "Crimes against Humanity". (Death Shots).
Tyranny & Corruption is Alive and Well, thanks to the "Palm Greasing" corporations keeping their Narrative Alive.
Lobbyists and Donors should be banned from "Paying kick backs" to corrupted politicians and CEO's for "Toeing the Line" with Respect to their Agendas.
I long for the time, when All the Lies are exposed, and the Truth to be Told.!

4 0 Reply • Share ›

Someone
18 hours ago

But then the really important stat is how many died because they were denied HCQ and their only truly safe and effective drugs? I'm sure that number is in the millions worldwide. Because let's get real, if 17,000 people died from HCQ, it was more like 17,000 people were murdered to demonize it.

3 0 Reply • Share ›

Alan Sterry → Someone
10 hours ago

People did die in the Oxford arm of the Recovery trial for that very purpose. I have a figure of over 1,200 in mind but such a long time ago now. They had to get rid of HCQ to enable the EUA. Dr Zelenko was the first to make this clear. RIP Zev.

2 0 Reply • Share ›

Mayfield
18 hours ago

Sounds like another garbage study. I don't believe anything in the drug company journals

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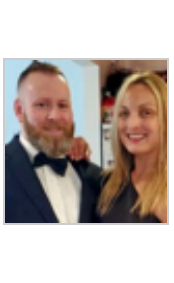

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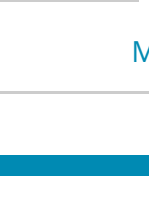

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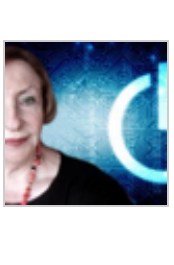

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now. Whether it's the February 2024 issue of Biomedicine & Pharmacotherapy, Lancet, Science, NEJM, JAMA...doesn't matter, they're all trash and take money from big pHarma.

3 0 Reply • Share ›

CastleConnell
18 hours ago

A study based on guessing, seriously, it is a baseless study, and I wonder did the scientists get paid for it, it seems they just want headlines to keep the lies going in the public's mind's eye. Also, as Dr. Nass points out, Fauci in 2014 knew Hcq worked. We all know they needed EUA for the clot shot mandates and had to suppress viral treatments that were effective to achieve that aim. People will believe these studies when presented on mainstream media and parrot it and argue with you, and if you try to explain the flaws you won't be given airtime in fact to go over them, and even if you are, the average person won't get it. The media are Dracula's minions, and all those who report the falsehoods, are vampires.

3 0 Reply • Share ›

> **Alan Sterry** → CastleConnell
> 10 hours ago
>
> I'm sure I remember Del Bigtree (The Highwire) telling us that a certain A. Fauci described Hydroxychlorquine as "REMARKABLY EFFECTIVE" against SARS. This was when they were looking at repurposed drugs for the original SARS outbreak. It was dated 2005. To get an idea f the timeline Del went way right out the back of his studio to hammer the point home.
>
> 2 0 Reply • Share ›

Mary Fisher
21 hours ago

HCQ is the best, ivermectin is the best and azithromycin is the best for the China virus and for the symptoms that linger afterwards. My children, grandchildren and I have been saved due to these inexpensive prescriptions from our doctors. Anything else are scare tactics by the media and others who benefit from big pharma.

3 0 Reply • Share ›

MotoJB
21 hours ago

Total BS, no, no it didn't. The mRNA, gene-editing, dna-altering, tranhumanist-agenda bioweapon shots killed 17m people and counting! Fauci, Gates, Bourla and many others to the gallows!

3 0 Reply • Share ›

TheOrneryNurse
6 hours ago

Let me guess. Pfizer or one of the other big pharmaceutical companies has come up with a new, more expensive drug for malaria and lupus? #NoAmnesty #NeverAgain

2 0 Reply • Share ›

Darby O'Gill
19 hours ago

HCQ ? NO way !! Remdesivir ?? That's the killer !!

2 0 Reply • Share ›

> **Alan Sterry** → Darby O'Gill
> 10 hours ago
>
> Remdesivir and the ventilator.
>
> 1 0 Reply • Share ›

Bill Snyder
19 hours ago

CDC=Snake Oil Salesmen. And I've taken every vaccine prior to mRNA because I travel the world. Never took mRNA and had to do the same testing protocols as those that did take mRNA. All a bunch of hype.

2 0 Reply • Share ›

Bill Snyder
19 hours ago

BTW, I took HCQ for my C-19 when it first came to my part of WA state. Done with it in 2 weeks, never looked back. No hiccups on any variant so far.

2 0 Reply • Share ›

Rob DF
20 hours ago

"For 90% of the total hospitalizations reviewed, the researchers had to guess at the rate of patients exposed to HCQ, ..." etc. etc. etc. How about we just summarize this article as the classis garbage in garbage out. Do all the people who congregate to medicine have no clue how to conduct experiments, collect data and analyze it? This is farsical.

2 0 Reply • Share ›

Dean Gano
20 hours ago

What I find interesting about these discussions is the total lack of presenting the fact-based causes of whatever is claimed to be true. In this case, one of many causal factors involved is that the immune system uses zinc to fight off viruses of all kinds. As we age our zinc levels drop considerably and the immune system can't fight off the viruses. And even if you take zinc supplements it can't get inside the cell to work because it needs a transporter, which is also in short supply. HCQ and Ivermectin are very good at transporting the zinc. Also, of the 20 co-morbidity conditions associated with COVID-19 deaths, such as old age, obesity, diabetes, all are caused by a lack of zinc and zinc transporters (called ionophores). Scientists have known these facts for decades, so for the "authorities" and Big Pharma to tell us otherwise really exposes the psychopaths who are behind this whole hoax.

2 0 Reply • Share ›

Diane Hackett Carlton
21 hours ago

Sigh. Why not look at what the stuff is successfully used for? Ranging from parasites to viruses to autoimmune disease and several things in between. It's an old, uncharacteristically safe and effective drug that even I, as a natural physician am using along with other natural things to treat lupus in myself. With very good luck. One wants to look at the action of a drug and other issues which alternative docs know to look at and the to choose based on a number of criteria. Some conventional docs are pretty good at that. Alternative docs who have studied things like Traditional Chinese Medicine and Ayurvedic Medicine and even the old Ecclectic forms of medicine practiced in this country prior to the AMA understand how to look at a patient; a disease state and its patterns; and the various opportunities available to put something together to help someone. Not everything has to be proven in studies. There is also use over time and it is also a valid method of verification. One we are almost impervious to at this point.

2 0 Reply • Share ›

Chris Parkinson
12 hours ago

HCQ and Ivermectin are drugs. Drugs ALWAYS have side effects even if they are mild.

The real panaceas are 500 mg of vitamin c, 5,000 iu's (at least) of vitamin d, zinc with added chrome and quercetin as prophylactics. High dose vitamin c intravenous, at least 25 grams per 24 hours in 4 divided doses in ICU for pneumonia.

Dr. Shiva told this to Trump in a letter which we know Trump received in March 2020.

The medical profession are using HCQ and Ivermectin as smokescreens to divert you from learning about these supplements that you don't need a doctor's prescription for.

You can use liposomal vitamin c for a high dose to reverse pneumonia. So you are not even dependent on murdering ICU physicians. This is what they don't want you to know!

1 0 Reply • Share ›

Bill Snyder
19 hours ago

Remember the gay gene back in the late 1990s? Same thing, flawed research, media ran with it because it served their agenda. I friggen hate news outlets that are simply propagandists. This is why NYT is failing big time.

1 0 Reply • Share ›

Brian Fraser
an hour ago

How do you know if you are the target of a psychological operation? Look for these signs:

1. The presence of fear, guilt, confusion, anxiety, urgency, repetition.
2. Use of division, anger, blame, isolation, meaningless or irrational behavior
3. The use of ridicule and unfounded accusations of disinformation, “conspiracy theories”, etc.
4. The widespread use of censorship, suppression of contrary viewpoints and information.
5. The use of bribes, coercion, mandates, threats of violence, intimidation.
6. The government breaking its own rules in the interest of "national security", "safety", etc.
7. Efforts to break up any sort of a sense of community.
8. Centralized control (banking, commerce, industry, education healthcare); no private property
9. Political Correctness (invented by the Communists in the 1930s).
10. Major “News” programs heavily scripted by Public Relations firms (“cookie cutter news”)

0 0 Reply • Share ›

jann
9 hours ago

I make my own HCQ by boiling grapefruit and lemon peels. Next we'll hear that grapefruit and lemons are dangerous.

0 0 Reply • Share ›

Chris Parkinson
12 hours ago edited

No free speech on CHD! My posts go straight into "pending" oblivion.

0 0 Reply • Share ›

> **John Stone** Mod → Chris Parkinson
> 9 hours ago
>
> Hi Chris
>
> Your original comment about HCQ and Ivermectin was posted: your two subsequent comments complaining that it wasn't posted haven't been.
>
> 0 0 Reply • Share ›

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Children's Health Defense® is a 501(c)(3) non-profit organization. Our mission is to end childhood health epidemics by working aggressively to eliminate harmful exposures, hold those responsible accountable and establish safeguards to prevent future harm. We fight corruption, mass surveillance and censorship that put profits before people as well as advocate for worldwide rights to health freedom and bodily autonomy.

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